

Virginia Board of Dentistry
SPECIAL BULLETIN
September 30, 2002

CLARIFICATION OF GENERAL SUPERVISION

The Board has received numerous questions and statement of concerns about the Emergency Regulations implementing General Supervision of Dental Hygienists. The questions cover diverse subjects ranging from billing to the procedures that may be delegated to the requirements for a prescription to the proximity of and the required relationship with the dentist. The Board at its September 20, 2002 meeting reviewed these questions from dentists, dental hygienists and interested organizations.

The Board intended through the promulgation of the emergency regulations to enable dentists to order certain limited hygiene treatment to be performed by a dental hygienist when the treating dentist is not present. The Board is interpreting the emergency regulations consistent with this intent as reflected in the answers to the following questions and comments. The following questions are stated exactly as they were submitted in the correspondence received by the Board.

- Q. Is placement of subgingival medicaments (i.e. arestin, periochip) permissible?
A. No, a dental hygienist practicing under general supervision may not place subgingival medicaments. The Virginia Drug Control Act requires that the administration of Schedule VI topical drugs be under the direction and supervision of a dentist.
- Q. Are x-rays permitted to be taken if the dentist prescribes?
A. Yes, a dental hygienist practicing under general supervision may take x-rays as ordered by the treating dentist.
- Q. Must the prescription include if x-rays may be taken? If so, can the prescription state "necessary x-rays"?
A. The dentist may order x-rays to be taken under general supervision. The x-rays to be taken should be specified in the order.
- Q. Is placement of a 15% hydrogen peroxide gel and phst-activating component permissible under general supervision or direct supervision?
A. Placement of these medicaments is not permitted under general supervision but is permitted under direct supervision. Schedule VI topical drugs may only be administered by a dental hygienist under the direction and supervision of a dentist.
- Q. A question has come up about free clinics and community health centers and how the law [translated to mean the Emergency Regulations] should be interpreted in those situations.
A. A dentist practicing in a free clinic, volunteer clinic or a public health program may issue an order for hygiene treatment under general supervision. Any dental hygienist

practicing in the free clinic, volunteer program or public health program may fill the order.

- Q. The requirement that the patient must be seen by a dentist for the initial evaluation makes the timely provision of care in free clinics and community health programs nearly impossible.
- A. The statute providing for general supervision requires that a dentist complete an evaluation and prescribe authorized services. Dental hygienists may only provide treatment when a dentist has previously evaluated the patient and ordered hygiene treatment to be provided under general supervision.
- Q. We are requesting clarification on the dentist-hygienist supervision ratio under general supervision.
- A. A dentist may not have more than two dental hygienists working under direction or general supervision at one and the same time in his private office/practice. If the dentist is present in the office then the hygienists providing treatment must be under direction. If the dentist has planned to be out of the office then he may have up to two hygienists working under general supervision. He may through issuance of a written order for hygiene treatment authorize any dental hygienist to treat patients in a free clinic, volunteer program or public health program under general supervision.
- Q. Both dentists and hygienists have raised questions about the application of topical anesthesia under general supervision. We contend that §54.1-3408 covers both the direction and general supervision of dental hygienists.
- A. The Board disagrees with this contention. The Virginia Drug Control Act requires that Schedule VI topical drugs may only be administered by a dental hygienist under the direction and supervision of a dentist.
- Q. 18 VAC 60-20-220.B.3 states a clinical exam can be performed under general supervision. Would this exam be considered equivalent to an ADA CDT code D00120 Periodic Oral Evaluation?
- A. The Board does not directly regulate billing practices. The Board's involvement in billing practices is triggered by receipt of a complaint that alleges false, deceptive or misleading billing activities that may constitute fraud. Patients and third party payers can file such complaints. The dentist is responsible for understanding and using codes such as the one referenced to accurately represent the service rendered.
- Q. With regard to prescribed or prescription is there a new written standard form of communication that is an ADA accepted legal document? It sounds like the patient can now be transposed to have the recommended treatment performed in any dental office, which we know to be true, but what of differing opinions?
- A. No, there is no standard form or format. The order may be entered in writing in the treatment notes for the patient or may be written on a separate form/sheet and then included in the patient's record. The order for treatment under general supervision must specify each service to be provided. That order must be followed exactly. The dental hygienist or another dentist cannot alter it.

- Q. With regard to consent of the hygienist, is the consent to be implied, written, or oral, for each patient, before, during, or after the hiring of such hygienist employee? What if the hygienist refuses or denies giving the consent?
- A. The agreement of the dental hygienist to practice under general supervision should be in writing and should be maintained on file by the dentist. The consent can be addressed before, during or after hiring at the discretion of the dentist and/or the dental hygienist. The dental hygienist's consent can be given generally and does not need to be documented in each patient's record. It is the dental hygienist's decision whether or not to consent to practice under general supervision.
- Q. With regard to informing the patient/legal guardian prior to the appointment, in a sense obtaining informed consent, why would a dentist potentially undermine his/her own authority in the event of miscommunication either intended or not, by an employee hygienist or other staff member, thereby risking compromising the integrity of the doctor-patient relationship?
- A. There is nothing in the regulations that would require a dentist to act in the manner you question. General supervision must be planned in advance of a patient visit based on the dentist's examination of the patient. The dentist may inform the patient of the proposal for general supervision or may delegate this responsibility to a staff member. A dentist is expected to establish the protocols to be used in his office in order to fully comply with the regulations for general supervision.
- Q. With regard to emergency procedures, in the event of a life-threatening emergency, why would a dentist place him/herself in a risk exposure situation by placing the safety of the practice in the hands of a potentially lesser-trained employee? What are the basic emergency training guidelines or minimal standard requirements?
- A. The dentist is not obligated to have dental hygienists practicing under general supervision. The dentist needs to decide whether treatment under direction or general supervision is more appropriate for each patient. He must provide services under direction if necessary to meet the individual needs of the patient. The Board has not established guidelines or minimal standards for emergency procedures. The Board charges the dentist with responsibility for planning for the management of emergencies in his absence.
- Q. Is the dentist permitted to charge an examination fee to patients if the hygienist performs the examination?
- A. The Board does not directly regulate billing practices. The Board's involvement in billing practices is triggered by receipt of a complaint that alleges false, deceptive or misleading billing activities that may be fraudulent. A dentist is free to charge for an examination to the extent that he has advised the patient about the nature of the examination and its costs. The willingness of third party payers to cover such costs should also be addressed with the patient.
- Q. May the doctor leave the office building after completing the initial examination and then assign the remaining procedures to the dental hygienists to do in his or her absence?

- A. Yes, provided the patient is properly noticed and does not object and there is an order for treatment under general supervision.
- Q. Are hygienists allowed to take alginate impressions in the dentist's absence?
- A. Yes, provided the order includes this service.
- Q. Are hygienists allowed to deliver bleaching trays to patients in the absence of the dentist?
- A. Yes, but they may not deliver bleaching agents.
- Q. Do the new regulations have any effect on billing procedures (i.e. should the dentist bill the patients and the insurance agency in the same manner as previously done?)
- A. The Board does not directly regulate billing practices. The Board's involvement in billing practices is triggered by receipt of a complaint that alleges false, deceptive or misleading billing activities that may be fraudulent. Patients and third party payers can file such complaints. A dentist is free to charge for services to the extent that he has advised the patient about the nature of the services and its costs. The willingness of third party payers to cover such costs should be addressed with the payers.
- Q. The committee (VDA Dental Practice Regulations Committee) would like to request a sample statement to patients informing them of the implementation of general supervision of hygienists.
- A. The Board declines to provide a sample statement. The Board charges the dentist with responsibility for meeting the requirements set forth in the regulations as he deems appropriate for his patients and his practice.
- Q. I ask for a point of clarification regarding 18 VAC 60-20-200. Does this mean that a dentist can have 4 hygienists working simultaneously? Two hygienists working under his direction + being examined and 2 hygienists working under general supervision.
- A. No, a dentist may not have 4 hygienists working simultaneously. The dentist should only employ general supervision during planned absences. A dentist may only have 2 hygienists working in his office/practice at one and the same time.

Questions and comments regarding the information in this bulletin should be directed to the executive director of the Board, Sandra K. Reen at (804) 662-9906 or 6603 West Broad Street, Richmond, Virginia, 23230-1717 or sandra.reen@dhp.virginia.gov.

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